

LAUNCESTON RURAL DISTRICT COUNCIL

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the year 1965

Health Area Office,
Launceston,
Cornwall

WILLIAM PATERSON, M.B., Ch.B., D.P.H.
Medical Officer of Health



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LAUNCESTON RURAL DISTRICT COUNCIL

Public Health & Housing Committee

Cllr. W.J.Ugnow - Chairman

Cllr. W.D.Allin

" Dr.J.A.W.Berryman

" F.Broad

" E.C.Chudleigh

" J.H.Cory

" G.Fishleigh

" Revd.R.W.Howlett

" R.T.Kneebone

Cllr.Miss D.Lethbridge

" W.J.Rowland

" H.S.Sandercock

" W.R.Sandercock

" F.Sandercock

" G.B.Smale

" J.N.Stephens

" A.L.Stephens

Sewerage Committee

Cllr. L.L.Pooley - Chairman

Cllr. A.Barriball

" R.A.Balsdon

" J.T.Carpenter

" E.Doidge

" H.E.Foote

" O.C.G.Harris

" H.R.Jones

" J.A.Mann

" F.C.Neale

" J.H.Sloman

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Public Health Officers of the Local Authority

MEDICAL OFFICER OF HEALTH

W.PATERSON, M.B., Ch.B.,D.P.H.

also holds appointments of :

Medical Officer of Health : Launceston Borough Council
 Bude/Stratton Urban District Council
 Stratton Rural District Council
 Camelford Rural District Council

Assistant County Medical Officer, Area No. 6 Cornwall County Council

School Medical Officer - Cornwall County Council

PUBLIC HEALTH INSPECTOR :

T.A.JUDD

MEAT INSPECTOR :

R.E.WARBURTON



SUMMARY OF VITAL STATISTICS

Area (in acres)	73,187
Population	5,960
No. of separate dwellings occupied	2,016
Rateable Value 1965	£92,406
Product of ld. rate at 31.3.65	£359. 6. 0.

<u>Live Births</u>	<u>TOTAL</u>	<u>Male</u>	<u>Female</u>	<u>Rate per 1,000 estimated population</u>
Legitimate	95	45	50	16.44
Illegitimate	3	-	3	
<u>Stillbirths</u>	1	1	-	10.101
				(Rate per 1,000 total births)
<u>Deaths</u> (all causes)	64	38	26	10.738

Deaths from Puerperal Causes :

Puerperal and post-abortive)	
sepsis)	N I L
Other Puerperal Causes)	

Infant Mortality (deaths under 1 year per 1,000 live births)

N I L

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Deaths from Cancer (all ages)	9	2	11
Measles (all ages)		N I L	
Whooping Cough (all ages)		N I L	
Diarrhoea (under 2)		N I L	

Health Area Office,
Launceston.

To: The Chairman and Councillors of the
Launceston Rural District.

Mr. Chairman, Miss Lethbridge and Gentlemen,

I have the honour to present the Annual Report of the
Medical Officer of Health for the year 1965.

The vital statistics for the year show an increase of one in the number of live births - 98 compared with 97 in 1964 - and a decrease of 19 in the number of deaths. The favourable balance of births over deaths was therefore continued and enhanced, but the Registrar-General's estimate of the mid-year population showed no change, remaining at 5960. Heart disease, vascular lesions of the nervous system and cancer in that order, were at the head of the list of causes of death.

The Rural District was involved in the epidemic of Sonne dysentery which affected the Launceston area in the last quarter of the year. This is the mild variety of dysentery, and 44 cases were notified in the Rural District. Apart from this, 64 cases of measles were notified, the majority occurring in November and December.

The illness of your Meat Inspector early in the year, and the difficulty in finding a substitute, meant that no meat inspection was carried out for two months. Fortunately, it was then possible to arrange for meat inspection by Veterinary Surgeons, since when 100% inspection has been carried out.

Progress continued in the provision of Council housing, and in sewerage and sewage disposal.

I wish to record my thanks to Mr. T.A.Judd, the Council's Public Health Inspector, for his valuable co-operation in all aspects of our work together and in the preparation of this report. To Mr. G.L.Davey, the Clerk of the Council, Mr. F.R.Thorne, the Council's Surveyor, and the Council's other officers, I am indebted for much willing help. I am grateful to the General Medical Practitioners for their co-operation.

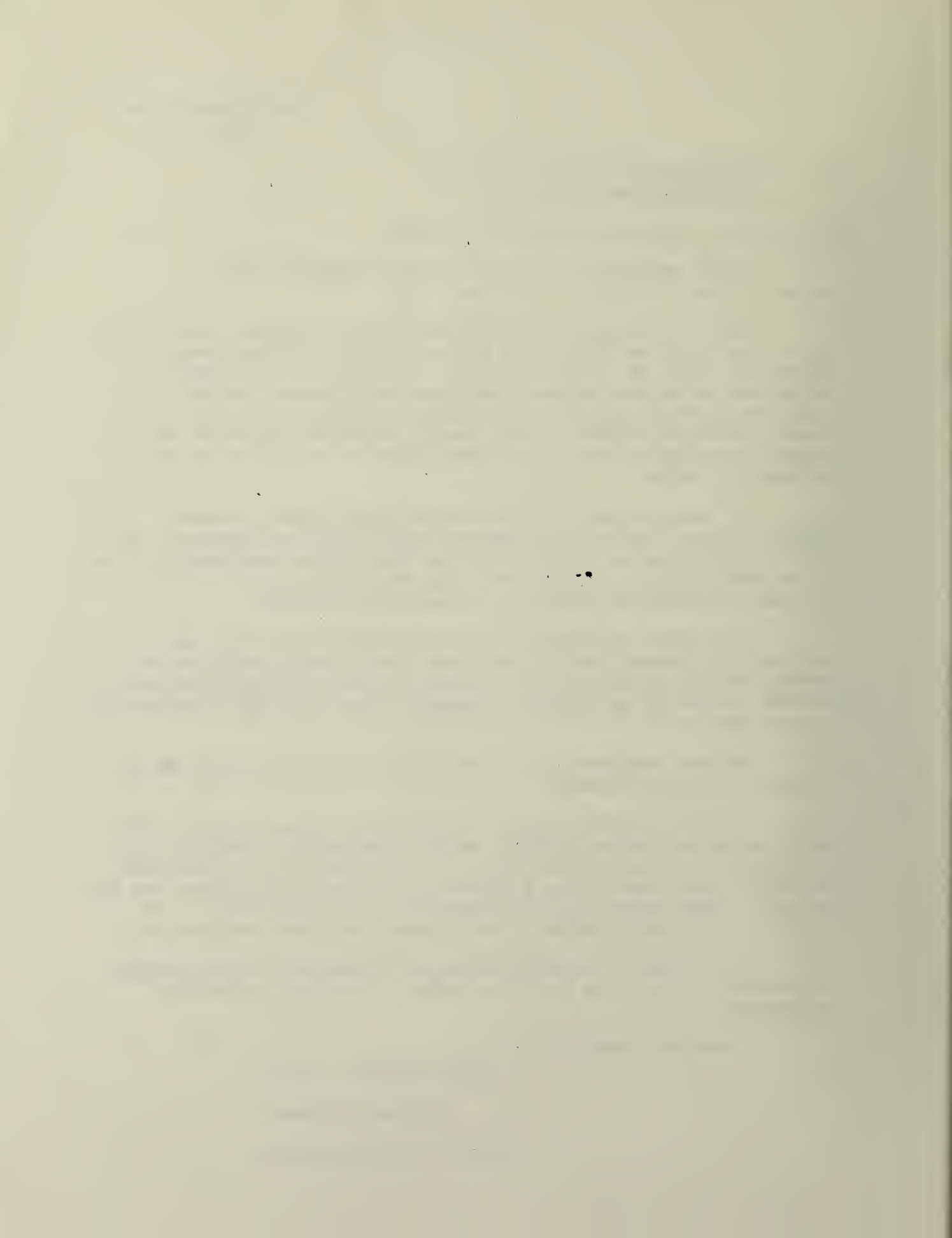
The interest of the Council and, in particular, of the Chairman and members of the Public Health Committee is once more gratefully acknowledged.

I have the honour to be,

Your obedient servant,

WILLIAM PATERSON

Medical Officer of Health



NATURAL AND SOCIAL CONDITIONS

Area (in acres) 73, 187. The district is essentially agricultural, the only industry not connected with agriculture - mining - being no longer in active operation.

Population - The Registrar General has estimated the population for the mid-year 1965 to be 5,960, the same as for the previous year. The "natural increase" in the population is the excess of births over deaths. In 1965 there were 34 more births than deaths.

Deaths - The total number of deaths assigned to the district for the year was 64 compared with 83 in 1964. The crude death rate based on the mid-year population was 10.738 compared with 13.926 in the previous year. The following table has been compiled for comparison with previous years :

<u>Year</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded Rate</u>
1961	78	36	42	13.02
1962	72	35	37	12.04
1963	76	38	38	12.73
1964	83	46	37	13.926
1965	64	38	26	10.738

In order to compare the mortality in the district with the mortality for England and Wales, it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District an "Area Comparability Factor" which has been estimated by the Registrar General as 0.87 for the District.

The Standardised Death Rate, therefore, is 9.342 which may be compared with that of 11.5 (provisional) for England and Wales.

Births - The number of live births assigned to this District was 98 compared with 97 in 1964. The rate per thousand of the population was 16.44. When the Registrar General's area Comparability Factor for births (1.11) is applied to this figure, the Standardised Birth Rate of 18.248 for this District compares with 18.1 (provisional) for England and Wales.

Stillbirths - There was one stillbirth in 1965.

Illegitimate Births - There were three illegitimate births assigned to the District during the year. Shown as a proportion of the total number of live births, this represents 3.006 per cent.

Maternal Mortality - There was no death connected with childbirth during the year.

Infant Mortality - There was no infant death in 1965.

NOTE:

VITAL STATISTICS

It is important that too much weight should not be attached to small variations in these rates from one year to the other, particularly where relatively small populations are involved - attention should rather be paid to the trend of these rates over a period of years.

MORTALITY TABLE

Classified in accordance with 36 headings based on the
Abbreviated List of the International Statistical
Classifications of Disease, Injuries and Causes of Death, 1955.

<u>Cause of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	-	-	-
2. Tuberculosis, other	-	-	-
3. Syphilitic disease	-	-	-
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infection	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	2	-	2
11. Malignant neoplasm, lung, bronchus	3	-	3
12. Malignant neoplasm, breast	-	-	-
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasms	4	2	6
15. Leukaemia, aleukaemia	-	-	-
16. Diabetes	1	-	1
17. Vascular lesions of nervous system	7	5	12
18. Coronary disease, angina	6	2	8
19. Hypertension with heart disease	2	2	4
20. Other heart disease	3	5	8
21. Other circulatory diseases	3	1	4
22. Influenza	-	-	-
23. Pneumonia	1	1	2
24. Bronchitis	1	-	1
25. Other diseases of respiratory system	-	-	-
26. Ulcer of stomach and duodenum	-	-	-
27. Gastritis, enteritis and diarrhoea	1	-	1
28. Nephritis and nephrosis	1	1	2
29. Hyperplasia of prostate	-	-	-
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	-	1	1
32. Other defined and ill-defined diseases	2	5	7
33. Motor vehicle accidents	1	-	1
34. All other accidents	-	1	1
35. Suicide	-	-	-
36. Homicide and operations of war	-	-	-
	38	26	64

GENERAL PROVISION OF HEALTH SERVICES

General Medical Services

General medical services under Part IV of the National Health Service Act, 1946, are provided by medical practitioners resident in the district and in adjoining districts, all of whom undertake maternity medical services.

County Council Services

- I Health Department. The County Council is the local health authority for the purposes of Part III of the National Health Service Act, 1946, and provides the following services in the district :-
- (a) Midwifery and Home Nursing. Nurse-midwives are provided to attend general nursing and midwifery cases in the home.
 - (b) Health Visiting. Health Visitors are available to give advice on health matters in the home or at the clinic. Originally concerned with the care of mothers and young children, which is still their basic function, they are increasingly concerned with other age groups, particularly the aged. Some health visitors combine this work with general nursing and midwifery. All act also as school nurses.
 - (c) Child Welfare Centre. A Child Welfare Clinic is held at the Health Clinic, Launceston, three times each month.
 - (d) Dental Clinic. Priority dental treatment for expectant and nursing mothers and pre-school children is available at the Dental Clinic at the Health Clinic, Launceston.
 - (e) Vaccination and Immunisation. Facilities for vaccination against smallpox and immunisation against diphtheria, whooping cough and tetanus, and for poliomyelitis vaccination, are provided at the Child Welfare Clinic or by the supply of materials to the family doctor.
 - (f) Home Help Service. Home helps are employed to provide domestic help for households in certain circumstances, a charge being made for this service according to the means of the person concerned.
 - (g) Ambulance Service. A service of ambulances for the conveyance of sick, accident and emergency cases is provided. For sitting cases, utilising sitting case vehicles are used. When appropriate, some such cases are carried by the Hospital Car Service, a voluntary organisation. Day-to-day administration of the service is carried out from the Ambulance Control, Bodmin.

- (h) Prevention of Illness, Care and After-care. A full-time tuberculosis health visitor is provided for the care and after-care of tuberculous persons. District nurses are available to assist in the treatment of such persons when required by the Chest Physician or family doctor. Routine tuberculin testing and, if necessary, B.C.G. vaccination (i.e. vaccination against tuberculosis) is provided for senior school children.

Certain special investigations are carried out in other types of illness by district health visitors, while health education is carried out by the County's Medical and Nursing staff.

- (i) Mental Health. The County Council has certain responsibilities in connection with the ascertainment of mental ill-health and mental deficiency, with the provision of statutory supervision, etc. for mental defectives living in the community, and with the provision of after-care following treatment for mental illness. The Mental Welfare Officer for the district works from the Health Area Office, Launceston.

II Education Department. As local education authority, the County Council is responsible for the School Health Service, which provides the following :-

Periodic Medical Inspection of pupils
Cleanliness Surveys of pupils
Dental Inspection and treatment of pupils
Ascertainment of handicapped pupils in need of
special education
Treatment Clinic, Health Clinic, Launceston :-

Dental Clinic, twice weekly.

Child Guidance, by arrangement at Launceston Child Guidance Clinic

III Welfare Department. This service is concerned with the welfare of the aged, and with that of various categories of handicapped persons. It is concerned also with the provision of temporary accommodation in certain circumstances for persons in urgent need thereof. The Welfare Officer for the district works from the Health Area Office, Launceston.

Hospital Services.

The South Western Regional Hospital Board is the hospital authority for the area.

Launceston Hospital provides in-patient and out-patient facilities in the district. Patients are referred also to hospitals in Plymouth and elsewhere: Cases of infectious disease are admitted to the Scott Isolation Hospital, Plymouth, and tuberculosis patients to Didworthy or Tehidy Sanatoria. Mental hospital accommodation is provided by St. Lawrence's Hospital and Laninval House, Bodmin and Moorfields Hospital, Ivybridge, Devon. An Orthopaedic Clinic is held weekly at the Health Clinic, Launceston, and a Physiotherapy Clinic at Tavistock Hospital. The Chest Clinic is held at Launceston Hospital. An Ophthalmic Clinic for school and pre-school children is held periodically at the Launceston Health Clinic. A Specialist Ante-Natal clinic is held in Launceston each week.

Laboratory Facilities.

These are provided by the Public Health Laboratories at Plymouth and Truro to which specimens for bacteriological examination are submitted.

SANITARY CIRCUMSTANCES OF THE DISTRICT

WATER SUPPLIES

The East Cornwall Water Board is the statutory water authority for most of the Rural District.

WATER SAMPLES

Public Supply Samples

81 samples were taken for bacteriological analysis by the East Cornwall water Board from the following public supplies all of which are chlorinated.

Altarnun	13 satisfactory	1 unsatisfactory
Bolventor	10 satisfactory	
Bray Shop	7 satisfactory	
Coads Green	9 satisfactory	
Trebullett	9 satisfactory	
Tregadillett	12 satisfactory	
Tutwell	10 satisfactory	1 unsatisfactory
Warbstow	9 satisfactory	

Private Supply Samples

Eight samples were taken from private supplies of which six were satisfactory and two unsatisfactory.

SEWERAGE AND SEWAGE DISPOSAL SCHEMES

The Council has modern schemes of sewerage and sewage disposal as follows :-

Altarnun and Five Lanes, including the hamlet of Trewint
South Petherwin and Daw's House
Stokeclimsland and Venterdon
North Hill
Coads Green
Middlewood
Lawhitton
Trebullett

Work on the Egloskerry Sewerage and Sewage Disposal Scheme started in August, 1965 and was well in hand by the end of the year.

The requisite plans and details concerning the sewerage and sewage disposal scheme for Lewannick and Polyphant were submitted to the Ministry of Housing and Local Government during the year, while plans for sewerage schemes for Langore, and for Higherland in the Parish of Stokeclimsland, were in active preparation.

PREVENTION OF DAMAGE BY PESTS ACT 1949

No rodent operator is employed by the Council. The Council supplies, at a nominal charge, Warfarin bait in ready-for-use packets.

MOVEABLE DWELLINGS

Licences issued this year were for two single caravans on two separate sites.

REFUSE COLLECTION

Collection is by contract, and all villages and hamlets, together with properties along the route taken by the covered lorry in travelling between one village and another, receive a fortnightly collection. There is a weekly collection from litter bins placed at various places along the A.30 (Trunk Road).

HOUSING

	Total number of Council Houses	114
	Council Houses completed in 1965 ...	Nil
	Private enterprise Houses completed in 1965	18
	Private enterprise Houses completed since 1945	116
1.	Houses in Clearance Area demolished ...	2
2.	Unfit Houses Closed under Sections 16(4), 17(1) of the Housing Act, 1957 ...	Nil
3.	Unfit Houses made fit and Houses in which defects were remedied :-	
(a)	After informal action	23
(b)	After formal notice under Public Health Acts	2
(c)	After formal notice under Sections 7 and 16, Housing Act, 1957	3

OVERCROWDING

The known cases of overcrowding at the end of the year concerned six dwellings occupied by six families of 30 persons.

THE RENT ACT 1957

No applications were received for a Certificate of Disrepair. Since the coming into force of the Act, only one Certificate has been applied for, which was later withdrawn upon the owner carrying out the necessary repairs.

HOUSE PURCHASE AND HOUSING ACTS, 1959 - 1964.

Since the passing of the Act, the Council has ceased to offer Discretionary grants and concentrated upon Standard grants :-

STANDARD GRANTS

1.	Schemes submitted during 1965	...	36
2.	Schemes approved during 1965	...	35
3.	Schemes completed during 1965	...	26
4.	Cost of schemes completed during 1965	...	£8,607
5.	Grants paid during 1965	...	£3,537
(a)	Total number of Standard grants offered	...	200
(b)	Total Standard grant schemes completed	...	144
(c)	Total cost of schemes completed	...	£41,392.8.6d.
(d)	Total grants paid	...	£17,700.7.2d.
	Water closets provided	...	133
	Baths provided	...	135
	Lavatory basins provided	...	132
	Hot water supplies provided	...	125
	Ventilated larders provided	...	69

The 144 Standard grant schemes completed were divided as follows :-

Owner occupied farms	...	45
Tenanted farms	...	16
Agricultural cottages	...	15
Owner occupied houses	...	44
Tenanted houses	...	24

Before the introduction of Standard grants, 52 houses were modernised by means of Improvement or Discretionary grants at an approved cost of £30,648.0.0d., the grants paid being £12,823.0.0d.

The 52 Improvement grants completed were divided as follows :-

Owner occupied farms	...	10
Tenanted farms	...	6
Agricultural cottages	...	22
Owner occupied houses	...	7
Tenanted houses	...	7

It is interesting to note that for a Standard grant the average cost has been £287 and grant paid £123, whilst for the Improvement Grants the average cost was £589 and the average grant was £246.

ICE CREAM

There is one Ice Cream Factory and twenty-two licences to retail Pre-packed Ice Cream^{are} in force.

FOOD PREMISES

There are in the district :-

Catering Establishments	13
Butcher's shops	4
Grocer's shops	27
Bakeries	Nil
Number of visits in connection with	
Food Hygiene Regulations	32
Informal Notices served	2

KNACKER'S YARD

There is one Knacker's Yard which is not licensed for the slaughter of horses. Conditions are satisfactory.

MEAT INSPECTION

Three slaughterhouses operate in the district, two of which slaughter for the wholesale market.

75,895 animals were slaughtered a drop of 1,289 animals. This decrease was the result of a change of ownership at one of the slaughterhouses, but the increase for 1966 is likely to be about 18,000 animals.

Your Meat Inspector (Mr. R.E. Warburton) fell sick in March and has since had to retire on medical grounds. We received no replies to our advertisement for a new Meat Inspector and for two months no meat was inspected.

We were fortunate in being able to make an arrangement with a firm of Veterinary Surgeons to carry out the meat inspection duties commencing on 1st May. This arrangement has proved most satisfactory and for the first time there is now 100% meat inspection.

Details of animals slaughtered and inspected are recorded in Table IV.

SCRAP METAL DEALERS ACT, 1964.

Seven Scrap Metal Dealers have been registered under the above Act.

FACTORIES ACT, 1961.

Total number of factories with power	26
Total number of factories without power	2
Outworkers	2
Engineering construction works	1

CLASSIFICATION OF FACTORIES

Agricultural Food stuffs	3
Motor Vehicle Repairs	7
Engineers and agricultural implements	5
Abattoirs	2
Provender	1
General Smithing	1
Concrete Block making	1
Joinery	2
Ice Cream Manufacture	1
Saw Mills	1
Poultry Appliances	2
Scrap Merchants	2
Total visits	20
Formal Notices	Nil
Informal Notices	1

Prescribed Particulars on the Administration of the Factories Act, 1961, are attached as an appendix to this report, in accordance with circular 1/60 of the Ministry of Health.

THE OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

As from the 1st July, 1964, persons employing labour in offices, shops and catering establishments have had to register under the above Act with the Local Authority. The Act lays down statutory requirements regarding many items such as overcrowding, temperature, sanitary and washing conveniences, first aid kits, etc.

Applications for registration received	11
Persons employed	37
Females employed	22

During the year, seven premises were inspected, i.e. 2 retail shops, 3 catering establishments open to the public and 2 offices. No accidents were reported.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

The infectious diseases which are statutorily notifiable to the Medical Officer of Health are the following :- smallpox, cholera, diphtheria, membranous croup, erysipelas, scarlet fever, typhus fever, typhoid fever, paratyphoid fever, relapsing fever, plague, poliomyelitis, tuberculosis, malaria, dysentery, puerperal pyrexia, ophthalmia neonatorum, acute primary pneumonia, acute influenzal pneumonia, whooping cough, measles, acute encephalitis, meningococcal infection, anthrax, leprosy and food poisoning.

The monthly incidence of infectious disease is shown in Table III.

Smallpox. No case was notified during the year, in the course of which 59 primary vaccinations and 7 re-vaccinations were carried out.

Diphtheria. No cases of this disease were notified during 1965. 83 children received a complete course of primary immunisation during the year, the triple antigen against diphtheria, whooping cough and tetanus being used in almost all instances. 264 children received booster injections.

Measles. 64 cases of this disease were notified during the year, 57 of the cases occurring in November and December.

Poliomyelitis No cases of this infection were notified during the year. 125 persons received a complete course of oral vaccination against the disease.

Dysentery The Rural District was affected by the epidemic of dysentery which affected the Launceston area in the last quarter of the year. The infection was of the mild variety caused by the organism *Shigella Sonnei*, and known as Sonne dysentery. The disease appeared in the first instance in the Rural District in children in the Lawhitton and Pipers Pool areas, who attend Launceston C.P.School, in which the infection first appeared. The outbreak remained largely confined to parishes adjoining the Borough of Launceston. Adults were also involved, principally by family contact with infected children. 44 cases were notified, of whom sixteen were adults. 30 cases occurred in October, 12 in November and two in December. Infection appeared to spread by direct contact, and transmission by articles of food and drink did not appear to occur.

The measures of control involved the follow-up of notified cases, of school absentees and of contacts, with submission of specimens for bacteriological examination. While, in the early stages of the epidemic, these specimens were sent for confirmation of the diagnosis, this practice was discontinued when the nature of the epidemic was established, and subsequently was carried out as a test of cure and of freedom from infection. Routine bacteriological checks of school staffs, including canteen workers, and of school milk and the water supply were carried out, with negative results.

Information on the types of antibiotic preparations specifically effective against the organism responsible for this epidemic was provided by the Public Health Laboratory, and was passed on to the local doctors. This enabled vigorous and efficient treatment to be carried out.

Infected children and adults were excluded from school and work for treatment. Children, and adults not involved in food handling, were allowed to return after one negative bacteriological report, while infected food handlers were excluded until three successive negative bacteriological reports were received after treatment. Family contacts of cases were also excluded until a negative bacteriological report was received.

The source of the original infection was not discovered in spite of the widespread investigations. This was almost certainly some person who was excreting the organisms, possibly having had no symptoms, or an unrecognised attack. The possibility of a connection with a similar outbreak in the Falmouth area during the summer was suspected, but could not be proved.

Anthrax. Anthrax is primarily a disease of animals, but is transmissible to man in whom, of recent years, it has been made a notifiable infectious disease.

When the disease occurs, or is suspected, in an animal, the Anthrax Order of 1938 provides for action to be taken in connection with the animal and the infected premises with a view to limitation of the spread of infection and its elimination from the affected place. This action is taken by the police acting, for this purpose, as inspectors on behalf of the County Council. Copies of the statutory notices required by the Order are sent, among others, to the Medical Officer of Health.

When a copy of the initial notice is received by your Medical Officer of Health, it is his practice to visit the premises in order to acquaint the human contacts of the personal precautions they should take, and of the action required if they should develop suspicious symptoms. The Medical Officer of Health also informs the family doctors of the contacts. As far as the animal and premises are concerned, the police deal thoroughly and satisfactorily with them.

During the year, nine notices of this nature were received concerning premises in widely separated parts of the Rural District. In two cases, the diagnosis of anthrax in the animal was confirmed, but, happily, the infection did not appear in any of the human contacts.

Food Poisoning. No case was notified during the year.

Tuberculosis.

	<u>Males</u>		<u>Females</u>	
	<u>Ful.</u>	<u>Non-Ful.</u>	<u>Ful.</u>	<u>Non-Ful.</u>
Cases on Register 31.12.64	5	2	11	1
No. of cases notified				
during year	1	-	1	-
Cases restored	-	-	-	-
Inward Transfers	-	-	-	1
Cases Removed	1	-	4	-
	<hr/>		<hr/>	
Total on Register	5	2	8	2
31.12.65.	<hr/>		<hr/>	

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 172 of the Public Health Act, 1936, which deals with the compulsory removal to hospital of persons suffering from tuberculosis.

The Regional Hospital Board is responsible for treatment of tuberculosis patients and the County Council for the prevention of spread of the disease and aftercare of the patients.

Out-patients and contacts are seen by the Chest Physician (Dr. Dawson) at the Chest Clinic at Launceston Hospital. The County Council Tuberculosis Health Visitor attends the Clinic, follows up the patients in their homes, traces contacts and sources of infection and thus acting as a most valuable essential "Liaison Officer" between the curative and preventive services, bridges a most alarming administrative gap.

All susceptible contacts of known cases are offered B.C.G. Vaccination and most avail themselves of this method of protection.

The scheme for B.C.G. Vaccination of susceptible children of secondary school age was continued by the County Council during the year, again with a good response.

OTHER DISEASES.

Cancer of the Lung.

During 1965, out of a total of 11 deaths from all forms of cancer, three male deaths were due to cancer of the lung. This brings the total of deaths from this cause in the district since 1949 to 17 male and two female deaths. During the same period, there have been 97 male and 95 female deaths from all forms of cancer.

Cancer of the Cervix. This type of cancer affects women, and affects the neck of the womb. Of recent years, a method has been evolved for the early detection of the condition before it reaches the cancerous stage, and when it is readily responsive to treatment. This process of early identification is known as cervical cytology, and involves the taking of smears from the tissue of the neck of the womb, which are examined microscopically at the Pathological Laboratory. The actual taking of the smear is completely painless.

In November, the County Council started a Cervical Cytology Clinic at Launceston to serve the whole of Health Area 6, which includes your Rural District. Two sessions were held before the end of the year, and the service has continued during the present year. There is no doubt that this service will prove of inestimable value, in the saving of life and the prevention of needless pain and invalidism.

TABLE I

TUBERCULOSIS

Age and Sex distribution of cases and deaths - 1965

Age Groups	New Cases				Deaths			
	Pul.		Other		Pul.		Other	
	M	F	M	F	M	F	M	F
0 -	-	-	-	-	-	-	-	-
1 -	-	-	-	-	-	-	-	-
5 -	-	-	-	-	-	-	-	-
15 -	-	-	-	-	-	-	-	-
20 -	-	-	-	-	-	-	-	-
25 -	-	-	-	-	-	-	-	-
35 -	-	-	-	-	-	-	-	-
45 -	1	-	-	-	-	-	-	-
55 -	-	1	-	-	-	-	-	-
65 and over	-	-	-	-	-	-	-	-
Age unknown	-	-	-	-	-	-	-	-

TABLE II

VITAL STATISTICS

YEAR	POPULATION (Estimated)	BIRTHS		DEATHS			
		Number	Crude Rate	Under 1 year		All ages	
				Number	Rate	Number	Rate
1961	5,990	100	16.69	3	30	78	13.02
1962	5,980	75	12.34	4	53	72	12.04
1963	5,970	102	17.085	3	29.41	76	12.73
1964	5,960	97	16.275	1	10.309	83	13.926
1965	5,960	98	16.44	-	-	64	10.738

TABLE III

Monthly Incidence of Notifiable Diseases (other than Tuberculosis)

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Measles	-	-	-	-	-	2	2	-	1	2	30	27	64
Dysentery	-	-	-	-	-	-	-	-	-	30	12	2	44
	-	-	-	-	-	2	2	-	1	32	42	29	108

TABLE IV

MEAT INSPECTION

Carcases and Offal inspected and condemned in whole or in part.

	Cattle excl. cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
No. killed	1204	699	5184	57,168	11,640	-
No. inspected	941	493	3155	42,574	9,597	-
<u>All diseases except Tuberculosis and Cysticercosis.</u>						
Whole carcasses condemned	3	9	8	112	17	-
Carcasses of which some part or organ was condemned	140	164	7	4407	424	-
% of the number inspected affected with disease other than tuberculosis and cysticercosis	15.19%	35.09%	0.48%	10.62%	4.6%	-
<u>Tuberculosis only</u>						
Whole carcasses condemned	-	-	-	-	2	-
Carcasses of which some part or organ was condemned	-	-	-	-	169	-
% of the number inspected affected with tuberculosis	-	-	-	-	1.78%	-
<u>Cysticercosis</u>						
Carcasses of which some part or organ was condemned	11	-	-	-	-	-
Carcasses submitted to treatment by refrigeration	11	-	-	-	-	-
Generalised and totally condemned	1	-	-	-	-	-

APPENDIX

FACTORIES ACT, 1961

Prescribed Particulars on the Administration of the
Factories Act, 1961

Part 1 of the Act

1 - INSPECTIONS for purposes of provisions as to health

Premises	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	2	2	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	26	17	1	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding Outworkers' Premises)	2	1	-	-
Total	30	20	1	-

2 - Cases in which DEFECTS were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
want of cleanliness (Section 1)	1	1	-	-	-
Overcrowding (Section 2)	-	-	-	-	-
Unreasonable temperature (Section 3)	-	-	-	-	-
Inadequate Ventilation (Section 4)	-	-	-	-	-
Ineffective drainage of floors (Section 6)	-	-	-	-	-
Sanitary Conveniences (Section 7)	-	-	-	-	-
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	-	-	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (Not including offences relating to outwork)	-	-	-	-	-
Total	1	1	-	-	-

PART VIII of the Act

Outwork

(Sections 133 and 134)

Nature of work	Section 133			Section 134		
	No. of outworkers in August list re- quired by Section 133(I)(c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecu- tions
Making Wearing Apparel	2	-	-	-	-	-

